

CITY OF REDDING
Personnel Policies and Procedures Manual

Section: **Miscellaneous**

Subject: **Continuing Education Program**

Personnel Director: Randa Johnson

Date: 9/3/09

City Manager: Kurt Ham

Date: 9/2/09

City Council Resolution No. (if applicable) N/A

Effective Date: 8/97

Purpose

The Continuing Education Program is intended to encourage and reward eligible employees who use their own time to enhance the value of their services to the City. An employee who participates in the Continuing Education Program may be reimbursed for tuition, the cost of required textbooks, and some other materials. The objective of the program is to improve the quality of City service delivery by increasing the effectiveness of City employees.

Policy

Employees are encouraged to further their education by taking courses which are: related to the employee's potential development with the City, or part of a program leading to a degree related to the employee's present position or potential for development.

Prior Approval

Application for course approval must be made by the employee and approved by the department director and the Personnel Director prior to taking a course or training program.

Eligibility for Program

Employees' eligibility to participate in the program is defined in the current Memorandums of Understanding.

Payment Amount

Reimbursement will be limited to the amount specified in the employee's current Memorandum of Understanding.

Procedure for Obtaining Approval and Reimbursement:

- A. The employee shall complete the Course Authorization and Reimbursement Certification forms (see page 17.12) prior to taking a course and shall submit it to their department director and the Personnel Director. Upon successful completion of the course/s the employee shall complete a Request for Demand and a Reimbursement Certification form (see page 17.13). The original forms are is filed in the Personnel Department, and a copy is returned to the employee.

- B. Upon completion of the course with a passing grade, the employee shall submit to their department director a Request for Demand and Reimbursement Certification with applicable receipts and a copy of the approved Course Authorization ~~and Reimbursement Certification~~ forms attached. If approved, the department will forward the Request for Demand and Reimbursement Certification to the Finance Department ~~Division~~ for processing.



Continuing Education Program

Course Authorization

Dept./Div. No._____
Dept./Div. Name_____
Employee

The following course(s) is/are hereby authorized in accordance with applicable City policies and procedures or Memoranda of Understanding:

Course(s)	Units	Educational Institution

The above course(s) will be completed by: _____
Date

I agree not to submit receipts for reimbursement unless I receive a passing grade on the above course(s).

Employee Signature_____
Date**Approved:**_____
Department Director_____
Date_____
Personnel Director_____
Date

Reimbursement Processing: Upon receiving authorization and upon completion of the course, please prepare a Reimbursement Form and a Request for Demand, attach applicable receipts, and submit to the director in your department for approval.

c: ORIGINAL: Personnel Office (Cont. Ed File) COPY: Employee



Continuing Education Program

Reimbursement Certification

Dept./Div. No._____
Dept./Div. Name_____
Employee

Application is hereby made for reimbursement in accordance with applicable City of Redding policies and procedures or Memoranda of Understanding.

Upon successful completion of the course/s, attach applicable receipts, prepare a Request for Demand, and submit to the director in your department for signature.

Course(s)	Units	Educational Institution

Tuition Cost: _____

Textbook Cost: _____

Total Reimbursement Amount: _____

I hereby certify that I have completed the above courses(s) taken for credit with a passing grade for each course taken, and that the total amount specified in this reimbursement request was actually expended by me as reported.

Employee Signature_____
Date**Approved:**_____
Department Director_____
Date_____
Personnel Director_____
Date

c: ORIGINAL: Personnel Office (Cont. Ed File) COPY: Employee